

JUN 27 2005

**VERTEX PHARMACEUTICALS INCORPORATED**130 Waverly Street
Cambridge, MA 02139-4242
Tel. 617.444.6100 Fax 617.444.6680
www.vrtx.com**FAX**

To	Commissioner for Patents Examiner: Paul V. Ward
Company	USPTO
FAX	(703) 872-9306
From	Michael C. Badia
Date	June 27, 2005
Subject	Application No. 10/609,417 Attorney Docket No. VPI/02-110 Amendment and Response to Office Action
Total Pages	26

Message or Comment**CERTIFICATE OF FACSIMILE TRANSMISSION**

I hereby certify that this correspondence, and any documents referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile Number: (703) 872-9306 on June 27, 2005.

If any problems occur with this fax transmittal, please call (617) 444-6832 immediately.

FAX Number (617) 444-6483 Legal Department

RECEIVED
OIPE/IAP

JUN 28 2005

CONFIDENTIALITY NOTICE

The information and the documents transmitted by this telecopy are privileged and contain confidential information intended only for the person(s) names above. Any other distribution, copying or disclosure is strictly prohibited. If you have received this telecopy in error, please notify us immediately by telephone and return the original to us without making a copy.

RECEIVED
CENTRAL FAX CENTER

JUN 27 2005

Attorney Docket No.: VPI/02-110 US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner: Paul V. Ward
Group: 1623
Applicants: Ronald Knegtel et al.
Serial No.: 10/609,147
Confirmation No.: 6705
Filed: June 27, 2003
For: CASPASE INHIBITORS AND USES THEREOF

June 27, 2005
Cambridge, Massachusetts

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL LETTER

Sir:

Transmitted herewith: ☒ a Reply to Office Action; ☒ a Petition for Extension of Time; ☐ a substitute Specification; ☐ a Declaration; ☐ a Supplemental Declaration; ☐ a Power of Attorney; ☐ an Associate Power of Attorney; ☐ formal drawings; ☐ Notice of Appeal; ☐ Appeal Brief; ☐ _____ to be filed in the above-identified patent application.

Confirmation No.:	6705
Filed:	June 27, 2003

FEE FOR ADDITIONAL CLAIMS

☒ A fee for additional claims is not required.

☐ A fee for additional claims is required.

The additional fee has been calculated as shown below:

CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	- 33	* =	X \$ 50	= \$ 0
INDEPENDENT CLAIMS	- 3	** =	X \$ 200	= \$ 0
FIRST PRESENTATION OF A MULTIPLE DEPENDENT CLAIM		+	\$ 360	= \$
* If less than 20, insert 20.		TOTAL		\$ 0
** If less than 3, insert 3.				

☐ A check in the amount of \$__ in payment of the filing fee is transmitted herewith.

☐ Please charge \$__ to Deposit Account No. 50-0725 in payment of the filing fee. A duplicate copy of this transmittal letter is transmitted herewith.

☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 C.F.R. § 1.16, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

Confirmation No.:	6705
Filed:	June 27, 2003

MISCELLANEOUS FEES

- ☐ Please charge \$500.00 to Deposit Account No. 50-0725 in payment of the fee for a Notice of Appeal (37 C.F.R. §41.20(b)(1)).
- ☐ Please charge \$500.00 to Deposit Account No. 50-0725 in payment of the fee for filing an Appeal Brief (37 C.F.R. §41.20(b)(2)).
- ☐ Please charge \$1000.00 to Deposit Account No. 50-0725 in payment of the fee for a Request for Oral Hearing (37 C.F.R. §41.20(b)(3)).
- ☐ Please charge \$_____ to Deposit Account No. 50-0725 in payment of the fee for _____ (37 C.F.R. §_____).
- ☒ The Director is hereby authorized to charge payment of any additional fees required under 37 C.F.R. § _____, in connection with the paper(s) transmitted herewith, or credit any overpayment of same, to deposit Account No. 50-0725. A duplicate copy of this transmittal letter is transmitted herewith.

Respectfully submitted,



Michael C. Badia, Reg. No. 51,424
Agent for Applicants
Vertex Pharmaceuticals Incorporated
130 Waverly Street
Cambridge, Massachusetts 02139
Tel: (617) 444-6467
Fax: (617) 444-6483

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that this correspondence, and any documents referred to as attached hereto, is/are being transmitted to the United States Patent and Trademark Office, Facsimile Number: (703) 872-9306 on June 27, 2005.

